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1762  
IFW

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Roby et al.

Examiner: J.K. Michener

Serial No.: 09/964,901

Group Art Unit: 1762

Filed: September 27, 2001

Dated: June 21, 2004

For: **SILICONIZED SURGICAL NEEDLES  
AND METHODS FOR THEIR MANUFACTURE**

MAIL STOP AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT TRANSMITTAL FORM**

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE	ADDIT. RATE FEE
TOTAL	*15 MINUS **29	=	X 9 \$	X 18 \$ 0	
INDEP.	*2 MINUS **4	=	X 43 \$	X 86 \$ 0	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			X 140 \$	X 280 \$ 0	
			TOTAL	OR TOTAL	\$ 0
			ADDIT. FEE	\$ -0-	

- \* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".
- \*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on date below.

Dated: June 21, 2004

Jennifer Puente

- ☐ Please charge Deposit Account No. 21-0550 in the amount of \$\_\_\_\_. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$\_\_\_\_ is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



Michael R. Brew  
Reg. No. 43,513  
Attorney for Applicant(s)

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MRB/jjp



**RESPONSE UNDER 37 CFR 1.116**  
**EXPEDITED PROCEDURE**  
**MAIL STOP AF**

Atty. Docket No. 2788 (203-2854)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANTS: Roby, et al. EXAMINER: J.K. Michener  
SERIAL NO.: 09/964,901 GROUP: 1762  
FILED: September 27, 2001 DATED: June 21, 2004  
FOR: **SILICONIZED SURGICAL  
NEEDLES AND METHODS FOR  
THEIR MANUFACTURE**

MAIL STOP AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE AFTER FINAL REJECTION**

Sir:

In response to the Office Action dated April 19, 2004, applicants request reconsideration and allowance of the above-referenced application in view of the following amendment and remarks.

Amendments to the Claims are set forth on page 2 of this paper.

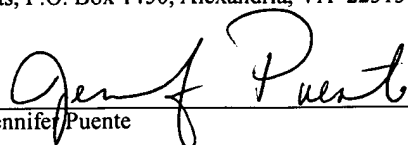
Remarks/Arguments begin on page 11 of this paper.

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Dated: June 21, 2004

  
Jennifer Puente